								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO Effective January 1, 2003								1D P20					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OR	OTHER THAN	
TOTAL CLAIMS			Ю					RATE FEE		FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE 375.00		375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			10 minus 20=		*			X\$ 9=			OR	X\$18=	
INDEPENDENT CLAIMS			minus 3 = *		·			X42=			OR	X84=	
MULTIPLE DEPENDENT CLAIM P			RESENT					+140		·	OR	+280=	
* If	the difference	in column 1 is	ess than zero, enter "0" in column 2						275	OR	TOTAL		
CLAIMS AS AMENDED - PART II								.0.7	•-	1212	l	OTHER	THAN
(Column 1) (Column 2) (Column 3)									LLE	ENTITY	OR	SMALL	
ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER OUSLY	PRESENT EXTRA		RATI	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MENDMENT	Total	*	Minus	**		_		X\$ 9	=		OR	X\$18=	
AME	independent	*	Minus	***		=	1	.X42	- 1		OR	X84=	
Ľ	FIRST PRESE	NTATION OF MI	JLTIPLE DE	PENDENT	CLAIM		J	+140				+280=	
,								TO			OR	TOTAL	
A	(Column 1) (Column 2) (Column 3)							ADDIT. F		<u> </u>	OR	ADDIT. FEE	
		CLAIMS		HIGH	EST	(Column 3)	ו ד			ADDI-		<u></u>	ADDI-
OMENT B		REMAINING AFTER AMENDMENT		PREVIO PAID	OUSLY	PRESENT EXTRA		RATI	Ε	TIONAL FEE		RATE	TIONAL FEE
NDN	Total	*	Minus	**		=		X\$ 9	= 1		OR	X\$18=	
AMENI	Independent	*	Minus	***	CLAINA	=	4	X42:	=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+140	=		OR	+280=	
								TO ADDIT. F			OR	TOTAL ADDIT. FEE	
	(Column 1) (Column 2) (Column 3)							הטטוו. ר	CE 1			ADDIT, FEE	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	EST BER DUSLY	PRESENT EXTRA		RATI	Ε	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9	=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=	╌┤	-		X84=	
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM]		\dashv		OR		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											OR	+280=	
**	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL ADDIT. FEE ADDIT. FEE												
		nber Previously Pa					er fo	und in the	e app	propriate bo	x in co	olumn 1.	